

MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET

SERIAL NO. 10796967  
APPLICANT(S)

FILING DATE

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT		CLAIMS			
	IND	DEP	IND	DEP	IND	DEP	IND	DEP	IND	DEP
1	1								51	
2	1								52	
3									53	
4	2								54	
5	2								55	
6	1								56	
7	2								57	
8	2								58	
9	2								59	
10	2								60	
11	2								61	
12	2								62	
13	2								63	
14	2								64	
15	2								65	
16	2								66	
17	2								67	
18	2								68	
19									69	
20									70	
21									71	
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39									89	
40									90	
41									91	
42									92	
43									93	
44									94	
45									95	
46									96	
47									97	
48									98	
49									99	
50									100	
TOTAL IND.	2									
TOTAL DEP.	29		14							
TOTAL CLAIMS	31		15							

BEST AVAILABLE COPY